

SNOWMOBILE SUPPLEMENTAL PAYMENT GUIDELINES



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Snowmobile Supplemental Payment Guidance

History

The concept of a supplemental payment for some element of snowmobile maintenance dates back to 1985. At that time, there was a desire to provide additional funds for the grooming of trails where the snow lingered longer and there was a heavy tourist presence. From this 1985 date for a period of 6 years, funds were made available from the snowmobile program for supplemental grooming payments, typically from balances in the program from project under-runs.

In 1990, the supplemental grooming payment was legislatively expanded to supplemental maintenance payments. Along with the expansion of eligible costs came a funding source. A 0.4 multiplier in the gas tax formula transfer was created and the funds generated by this multiplier were targeted for supplemental maintenance payments. In 1999, this amount was further increased by a formula transfer of a portion of the non-resident trail pass fee established in 1998.

Thresholds/Caps

Threshold and eligibility language has changed a few times since the supplemental maintenance program's inception. Currently, a county must:

- Expend its entire per mile maintenance at \$250 per mile
- Expend a minimum of \$150 per mile on grooming

In addition:

- The maximum allowable non-grooming expense is \$250 per mile
- The maximum cap on total payments for any county is 3 times the per mile rate, i.e., currently \$750 per mile

Eligible Costs

Snowmobile trail maintenance is defined under NR 50, Wis. Adm. Code, as the activities associated with establishing and keeping a trail safe and enjoyable to use. These activities include posting signs, brushing, grooming of snow, minor repair of bridges, purchase of liability insurance by counties for snowmobile trails and acquisitions of easements, leases or permits or other land use agreements for periods of less than 3 years.

Core to this payment process is the concept of placing a value on the donations of labor and machine use by snowmobile club volunteers for work undertaken. The Snowmobile Recreation Council annually reviews an equipment and labor schedule that includes labor rates for club members, chargeback rates for grooming equipment and rates for some common pieces of equipment used for non-grooming maintenance. Rates for other pieces of equipment are found in the DOT machinery rates. Note: The version of the DOT rates that are used, including any fuel adjustments, correspond to the year that the maintenance agreements are issued and carry through into the following calendar year.

These rates apply to actual use time for equipment and labor during the activity. Examples include the following :

- For signing activities, vehicle use will be less than the number of labor hours. Hours for equipment when parked or idling are not eligible as club members need time to install or remove the signs
- For brushing activities, the claims for a chain saw and ATV *combined* can only equal the labor hours. You cannot operate a chain saw and operate an ATV at the same time. The charge for equipment used intermittently in the course of the work activity should reflect the sum of the intermittent periods.

- Truck and labor hours for the time commuting to and from home are not eligible unless you are transporting equipment and/or supplies that will be used in the maintenance activity to be undertaken that day.
- The cost of transporting the groomer from its storage location to the trails to be groomed is an eligible cost.
- The costs involved in extracting a stuck grooming unit are not eligible. The grooming equipment hourly rates are established to cover the costs of owning and operating the grooming equipment. Just like the cost of fuel, insurance or replacement parts, this is a cost of operating the equipment.
- Charging for groomer time while the groomer is idling while the operators are having lunch is not an eligible expense.
- Grooming of trails not funded by the DNR is not an eligible expense.

For those counties that also receive grants from the Department's all-terrain vehicle program, the eligible costs incurred under all-terrain vehicle maintenance agreements cannot be included as claims against snowmobile maintenance funds.

Example: County A.....

Incurs \$500 per mile for maintenance of winter snowmobile trails that also accommodate winter ATV trails	\$500/mile
Bills out \$100 per mile from winter ATV grant	-\$100/mile
Balance due to the snowmobile program	\$400/mile
Amount charged to basic snowmobile program	-\$250/mile
Balance eligible for supplemental maintenance payment, assuming other necessary thresholds have been met	\$150/mile

Review Process

A written request for supplemental maintenance payments is due in the appropriate DNR regional office by August 1 of each year. The request consists of completed Department forms along with necessary supporting documentation (see page 3 for more detail). This documentation covers work done or expenses incurred for the entire period of the maintenance grant agreement of the previous year. This information is then reviewed to determine: (1) if program thresholds have been met, (2) if costs reported are eligible and (3) if appropriate caps need to be applied. In years when the total request for supplemental funds exceeds the funds available, the review of costs will determine the final statewide prorate for each county's claim.

Payments

Advance

Counties are eligible to request 50% advance payments at the time the supplemental request is forwarded to the Department. Based on a preliminary review of all requests received to see if adequate funds are available, the Department will forward to counties checks equal to 50% of the requested amount by September 15. These payments are made to the county so that they can advance funds to the cooperating clubs or association of clubs.

Final

The final payment process is initiated by a letter from the Department to the county indicating the approved amount for payment. This letter will be mailed on or before December 1 each year. This is the authorization that the county needs to issue a final payment to the club(s), association or alliance. The county claims reimbursement of the final payment from the regional Community Services Specialist (CSS) when they have received the canceled checks or bank statements with checks highlighted from all the club or association recipients.

In some years of prorated payments, this final payment process may be extended when the Department requests an additional payment from other snowmobile funds through the s. 13.10 process with the Legislature's Joint Committee on Finance. This payment is again similar to the final payment process, i.e., notification by the Department to the county followed by a county's claim for reimbursement to the regional CSS after the payments have been made to the club(s), association or alliance.

Required Forms for a Supplemental Snowmobile Request

The following forms must be completed:

- 8700 - 003 Supplemental Payment Request (used for original supplemental request and final county supplemental reimbursement)
- 8700 - 004 Supplemental Maintenance Worksheet
- 8700 - 005 Trail Grooming Record (as many as necessary)
- 8700 - 006 Trail Non-Grooming Record (as many as necessary)

All these forms are found on the Department's webpage at the following address:

<http://dnr.wi.gov/org/caer/cfa/grants/forms/forms.html#S>

The forms may be printed and completed by hand or completed on your computer and then printed.

In addition to the required forms above, the following documentation must accompany the request:

1. Vendor invoices, which support the eligibility of the costs claimed. This extends to the original vendor invoices when snowmobile clubs or associations purchase materials and are then reimbursed by the county. Note: If an individual purchases materials on behalf of a snowmobile club, the sales tax is not an eligible expense.
2. Machine usage records that substantiate the use of each equipment item for which costs are claimed. These records should be kept on a daily basis and show the hours, dates, and project function for which the equipment was used.
3. Labor records documenting the hours worked, dates, and hourly rates of individuals, including both force account or club members, working on trail maintenance activities
4. Invoice for county liability insurance. If such insurance is provided through a rider to the county's general policy, documentation should also be available of how the cost was equitably allocated to the snowmobile program.
5. Summary of landowners paid for short-term acquisition and payments, if applicable.

FOR ADDITIONAL INFORMATION, CONTACT YOUR REGIONAL COMMUNITY SERVICES SPECIALIST FOUND BELOW OR LARRY FREIDIG AT (608) 266-5897 OR larry.freidig@dnr.state.wi.us

Northeast Region Counties: Brown, Calumet, Door, Fond du Lac, Green Lake Kewaunee, Manitowoc, Marinette, Marquette, Menominee, Oconto, Outagamie, Shawano, Waupaca, Waushara, Winnebago

GARY HANSON
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Green Bay, WI 54307-0448

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West Central Region Counties: Adams, Buffalo, Chippewa, Clark, Crawford, Dunn, Eau Claire, Jackson, Juneau, La Crosse, Marathon, Monroe, Pepin, Pierce, Portage, St. Croix, Trempealeau, Vernon, Wood

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South Central Region Counties: Columbia, Dane, Dodge, Grant, Green, Iowa, Jefferson, Lafayette, Richland, Rock, Sauk

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Northern Region

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Spooner Office Counties: Ashland, Barron, Bayfield, Burnett, Douglas, Polk, Rusk, Sawyer, Washburn

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Excerpts of Grooming Trail Maintenance Reporting Record

State of Wisconsin
Department of Natural Resources
PO Box 7921, Madison WI 53707-7921
dnr.wi.gov/org/caer/cfa

Sheet __1__ of __5__

Snowmobile / ATV Trail Aids Program
Trail Grooming Record
Form 8700-005 (8/05)

Notice: Completion and submission of the data requested on this form is necessary to document actual costs incurred and is authorized pursuant to s. 350.12(4)(bm), Wis. Stats., and NR 50.05(16), NR 50.09(4)(f)4 and NR 64.13(5), Wis. Adm. Code. Personally identifiable information collected will be used for program administration and may be made available to requesters as required under Wisconsin's Open Records law [ss. 19.31-19.39, Wis. Stats.]. The costs documented here will serve as the basis of grant reimbursement.

64.13(5), Wis. Adm. Code. Personally identifiable information collected will be used for program administration and may be made available to requesters as required under Wisconsin's Open Records law [ss. 19.31-19.39, Wis. Stats.]. The costs documented here will serve as the basis of grant reimbursement.

Club / Contractor West County Alliance							County West				
Date	Trail/Name/No.	Operator Name(s)	Hours of Operation				Total Hours	Groomer Type / Class	Drag Width–Length– Weight	Rate	Total \$
			Clock Time		Meter Time						
			Begin	End	Begin	End					
1/15/05	Trail 19N	R. Smith	10:00PM	5:00 AM			7.0	Tucker – A2	9"6" -18'-2000 lbs	\$ 60	\$420.00
1/16/05	Trail 32E	Don Road	10:00PM	6:00 AM			8.0	Tucker – A3	7'6" -18'-2000 lbs	\$45	\$360.00
1/16/05	Trail 19S	R. Smith	10:00PM	6:00 AM			8.0	Tucker – A2	9'6" -18' -2000 lbs	\$60	\$480.00
1/17/05	Trail 3A	Ed Nutt	6:00 AM	12:00PM			6.0	105 hp tractor-A-4	7'6"	\$40	\$240.00

\$1,500.00

Excerpts of Non-Grooming Trail Maintenance Reporting Records

State of Wisconsin
Department of Natural Resources
PO Box 7921, Madison WI 53707-7921
dnr.wi.gov/org/caer/cfa

Snowmobile / ATV Trail Aids Program
Trail Non-Grooming Maintenance Record
Form 8700-006 (8/05)

Sheet 1 of 3

Notice: Completion and submission of the data requested on this form is necessary to document actual costs incurred and is authorized pursuant to s. 350.12(4)(bm), Wis. Stats., and NR 50.05(16), NR 50.09(4)(f)4 and NR 64.13(5), Wis. Adm. Code. Personally identifiable information collected will be used for program administration and may be made available to requesters as required under Wisconsin's Open Records law [ss. 19.31-19.39, Wis. Stats.]. The costs documented here will serve as the basis of grant reimbursement.

Club / Contractor West County Alliance	County West
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Date	Labor (\$6.50 per hour)				Equipment and Supplies (ATV, snowmobile, saw, tractor, truck, etc.)			
	Work Description	Worker	Hours Worked	Total \$	Equipment / Supplies Description *Include DOT class number where appropriate*	Hours Used	Hourly Rate	Total \$
9/8/04	Signing	P. Smith	4.0	\$26.00	ATV	3.0	\$13.00	\$39.00
		Al Chrome	4.0	\$26.00	ATV	3.0	\$13.00	\$39.00
		Bob Jones	4.0	\$26.00	Truck	3.0	\$13.00	\$39.00
		Sam Sound	5.0	\$32.50	Truck (sign materials from home and install)	5.0	\$13.00	\$65.00
10/03/04	Brushing trail	Sam Smith	6.0	\$33.00	Large Tractor, 100 hp	6.0	\$42.00	\$252.00
					#940 tractor mounted brush cutter	6.0	\$17.76	\$106.56
10/15/04	Brushing trail	John Jones	4.0	\$26.00	ATV	3.0	\$13.00	\$39.00
					Chainsaw	1.0	\$7.50	\$7.50
		Stu Wind	4.0	\$26.00	ATV	2.0	\$13.00	\$26.00
					Chainsaw	2.0	\$7.50	\$15.00
10/17/04	Leveling trails	Sam Smith	5.5	\$35.75	Large tractor, 110 hp	5.5	\$42.00	\$231.00
					Cultimulcher	5.5	\$12.00	\$66.00
10/25/04	Bridge repair	Ed Fourer	4.0	\$26.00	Truck (pick up and deliver lumber to site)	1.5	\$13.00	\$19.50
					Leverance Sawmill - lumber			\$45.00
			40.5	\$263.25	Total Equipment & Supplies			\$989.56
			Total Hours	Total Labor \$	Total Labor and Equipment & Supplies			\$1,252.81

County Snowmobile Trail Aids Program Supplemental Payment Request

Form 8700-003 (8/05)

Page 1 of 2

Notice: This form is authorized by s. NR 50.09(4)(f), Wis. Adm. Code. Project Sponsors are required to provide information requested on this form when applying for a final payment or a supplemental maintenance request of a grant funded by the Department. The Department will not process your payment unless you provide all information requested. This information will be used to determine the amount of your payment and issue your check or establish the amount of your supplemental payment. Personally identifiable information collected will be used for program administration and may be made available to requesters as required under Wisconsin's Open Records law [ss. 19.31-19.39, Wis. Stats.].

Instructions: See reverse for instructions on completing this request. Submit one copy of this request form, your completed Supplemental Maintenance Worksheet (Form 8700-004), and other required documentation listed on reverse, to your DNR Grant Specialist by August 1. See the DNR web site for additional information: dnr.wi.gov/org/caer/cfa.

Project Sponsor Information

Project Sponsor	Grant Number
Project Name	County

The DNR will mail the check to the name identified on the application as "Check Recipient." Questions? Contact DNR Grant Specialist.

Type of Request: (Select those that apply – max. of 2)

☐ Maintenance Agreement Final (Sections A & B) ☐ Supplemental Advance (Line 1, Section C) ☐ Supplemental Final (Section D)

Maintenance Agreement Payment Information (see reverse for instructions)

A. Payment Record to Date	Amount	This Column for DNR Use Only
1. Amount of Grant (from original or amended Grant Agreement)	\$	
2. Advance Payment Received, if any		
3. Funds Remaining (Line 1 minus Line 2)		

B. Payment Request

4. Amount Eligible this Claim. Transfer data from "Total Amount Paid" field on Supplemental Maintenance Worksheet (Form 8700-004).		
5. Amount of Final Claim (Line 4 minus Line 2) Note: This line cannot exceed the amount in Line 3		

C. Supplemental Request

6. Total Eligible Costs This Period. Transfer data from "Total Project Claim" field on Supplemental Maintenance Worksheet (Form 8700-004).		
7. Maintenance Payment Received from a Winter ATV Grant		
8. Adjusted Total Eligible Cost this Period (Line 6 minus Line 7)		
9. Total Supplemental Request (Line 8 minus Line 1)		
10. Supplemental Advance Requested?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

D. Supplemental Payment

11. Final Supplemental Request Amount as Reviewed by Department		
12. Supplemental Advance Received, if Requested		
13. Final Supplemental Payment (Balance) Requested (Line 11 minus Line 12)	\$	

Certification

I certify that, to the best of my knowledge and belief, the eligible costs requested are in accordance with the terms of the grant agreement and that all expenditures are based on actual payments of record. This reimbursement represents the grant share due that has not been previously requested.

Name of Authorized Representative - type or print	(Area Code) Telephone Number
Signature of Authorized Representative	(Area Code) FAX Number
Date Signed	E-mail Address

Space Below this Line for DNR Use Only

Grant Specialist Signature	Reimbursement Approval Date
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County Snowmobile Trail Aids Program
Supplemental Payment Request

Form 8700-003 (8/05)

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Instructions

Line 1: Amount of Grant (from original or amended Grant Agreement). Enter amount from the first page of your grant agreement on the line that says "State Aid Amount".

Line 2: Advance Payment Received, If Any. The snowmobile trail aids program allows you to request a 50% advance of the amount of the grant at the beginning of the grant period. If you requested no advance payment, enter \$0. If you requested an advance, this amount is indicated on the signature page of your original grant agreement. Enter this amount on Line 2.

Line 3: Funds Remaining. This is the balance of your maintenance grant award after subtracting the advance payment of your original grant agreement (Line 1 minus Line 2).

Line 4: Amount Eligible This Claim. Transfer amount from "Total Amount Paid" field on the Supplemental Maintenance Worksheet, Form 8700-004. This is the total of all eligible expenses claimed for snowmobile trail maintenance incurred during the project period, not to exceed the amount specified in the grant agreement.

Line 5: Amount of Final Claim. Subtract the *Advance Payment Received* from the *Amount Eligible This Claim* (Line 4 minus Line 2). This is the balance of the eligible expenses that will be reimbursed under the maintenance grant agreement.

Line 6: Total Eligible Costs This Period. Transfer data from "Total Project Claim" field on Supplemental Maintenance Worksheet (Form 8700-004). This is your total claim for snowmobile trail maintenance during the project period.

Line 7: Maintenance Payment Received from a Winter ATV Grant. Enter the amount claimed from the ATV program for maintaining the trail system for winter ATV riding.

Line 8: Adjusted Total Eligible Cost this Period. This is the total cost of eligible maintenance expenditures reduced by any winter ATV maintenance claim (Line 6 minus Line 7).

Line 9: Total Supplemental Request. Subtract *Total Eligible Costs This Period* from the *Amount of the Grant* (Line 8 minus Line 1). This is the total of eligible maintenance expenses (supplemental request) incurred during the project period.

Line 10: Supplemental Advance Requested? Do you want a 50% advance payment of the supplemental amount claimed? If yes, check the box next to Yes. The supplemental payment will be mailed to you no later than September 15.

Line 11: Final Supplemental Request Amount as Reviewed by Department. This is the total supplemental request after it has been reviewed by the Department. This information will be mailed to you no later than December 1.

Line 12: Supplemental Advance Received, if Requested. This is the 50% advance supplemental payment requested in Line 10. If you did not request a 50% supplemental advance, please enter \$0.

Line 13: Final Supplemental Payment (Balance) Requested. Subtract *Supplemental Advance* from *Final Supplemental Requests as Reviewed by Department* (Line 11 minus Line 12). This is the balance of your supplemental payment for which you are requesting reimbursement. Note that this amount may differ from the 50% advance total as a result of modifications made as a result of Department review (Line 11).

REQUIRED DOCUMENTATION

- Supplemental Maintenance Worksheet (Form 8700-004) (as many as necessary)
- Trail Grooming Record (Form 8700-005) (as many as necessary)
- Non-Grooming Record (Form 8700-006) (as many as necessary)
- Copies of vendor invoices, canceled checks (or bank statement showing checks) and county payroll vouchers
- Summary of landowners paid for short term acquisition and amounts, if applicable

County Snowmobile Trail Aids Program
Supplemental Maintenance Worksheet

Form 8700-004 (8/05)

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This worksheet serves to itemize all project expenses under the Snowmobile Trail Maintenance as Specified in Maintenance Grant Agreement portion and also itemize all project expenses under the Supplemental Maintenance Request portion.

Snowmobile Trail Maintenance as Specified in Maintenance Grant Agreement Portion

Date Expense Incurred: Date of invoice, purchase or service rendered. Costs incurred prior to the beginning date or after the ending date of the maintenance grant agreement are not eligible for reimbursement.

Check Number: Number on check or money order used to pay the expense. Acceptable documentation includes: canceled check with front side of check containing the amount of the check digitally printed by the bank under the signature line; non-canceled check with bank statement showing check cleared account; county payroll vouchers; credit card statements.

Payee: Name of contractor, vendor, supplier, etc., to whom payment was made.

Grooming: The cost of grooming snowmobile trails based on the hourly chargeback for the use and operation of grooming equipment specified in the equipment and labor schedule established annually by the Department. Attach Trail Grooming Record(s) (Form 8700-005).

Other: The cost of maintaining a snowmobile trail other than snowmobile grooming. These costs may include posting of signs, brushing, minor repair of bridges, purchase of county liability insurance and the purchase of short-term easements or other land use agreements for a period of less than 3 years. Rates for non-grooming labor and frequently used pieces of equipment for non-grooming maintenance are specified in the equipment and labor schedule established annually by the Department.

Equipment rates for pieces of equipment not found on this list will be found in the Department of Transportation (DOT) rates. Unless specified otherwise, these rates for equipment are based on hourly use. These rates do not include the operator. Where the DOT issues rates that reflect an adjustment due to fuel rates, these rates shall be the rates utilized for the season.

Amount Paid: The actual expenditures for trail maintenance activities, services or products.

Total Amount Paid: Sum of all the expenditures. Enter this total on line 4 of the Supplemental Payment Request (Form 8700-003).

Supplemental Maintenance Request Portion

Grooming Submitted: Cost of grooming claimed above the \$250 per mile contract amount.

Other Submitted: Other non-grooming costs claimed above the \$250 per mile contract amount.

Total Supplemental Requested: Sum of grooming and non-grooming costs claimed above the \$250 per mile contract amount.

Total Project Claim: Sum of Total Amount Paid and Total Supplemental Requested. Enter this total on line 6 of the Supplemental Payment Request (Form 8700-003).